07 MAR 2005

MULTIPLE DEPENDENT CLAIM SERIAL NO. FEE CALCULATION SHEET FILING DATE (FOR USE WITH FORM PTO-875) CLAIMS (703) 305-6421 AFTER AS FILED AFTER 1"AMENDMENT 2 MAMENDMENT AFTER AS FILED AFTER IND. DRP. IND. I"AMENDMENT DEP. IND. DEP. 1 AMENDMENT IND. DEP. IND. DEP. IND. DEP. TOTAL IND A TOTALEXE TOTAL DEP **∳**≢ TOTAL TOTAL DEP <a CLAIMS TOTAL CLADIS PTO - 1360 (DESC 1180) U.S. DEPARTMENT of COMMERCE